

Ground Disturbance Permit

Location/Well ID_____

Job Name & Description o	f Work:		Document Control No:													
Type or disturbance:		(PERMIT-Date-Initials)														
Size of disturbance:			PERMIT-													
Size of utility search zone: Date/Time Permit Request	ed:	Date/Time Permit Issued:		Date/Time Permit Expires:												
			Date/ Time remit Expires.													
	Contact Information															
	Name		Company	Phone	e Nun	ber										
Issuing Authority																
Performing Authority																
Qualified Line Finder																
One-Call Public Locator	NA		Utility Service Alert (USA	.)	800-2	800-227-2600										
Emergency Contact	NA		911													
Alternate Emergency Contact	NA		Lyon County Sheriff		775-4	163-6	620	,								
F		Yes	No	NA												
1. Within the last 10 days, ar	For any item answered "NO", a Management of Change must be completed before work can proceed. O days, and no less than 48 hours from the initiation of this task, contacts were notified that a One-Call utility locate was made															
confirm the existence and location of underground facilities near the work area. 2. Available records have been referenced, and a plot plan indicating the location of all underground facilities (including those installed horizontally)																
has been provided and is available for reference at the work site.																
3. All approvals, notifications and agreements have been obtained and are attached to this permit.																
 A Competent Person (CP) has conducted a pre-job safety meeting, including a review of the Risk Assessment and TSEA. Everyone involved in the work has reviewed the health and safety plan (HASP) and the emergency response plan (ERP), and the plans 																
	are available on site for anyone to review at any time.															
	urbance area(s) have been identified and all underground facilities in the search zone and dig zone have been marked.															
	of the line locator, and calibration of the relevant equipment, have been verified. Proofs of competency and calibration records are the permit or in the project safety record.															
 Approved techniques for e known underground facilit 	proved techniques for exposing underground facilities within 2' of ground disturbance have been (or will be) used to verify the location of all															
	Other work permits, as applicable, have been completed and are attached.															
10. Precautions have been ta	10. Precautions have been taken to prevent contact with overhead or below-ground power lines.															
11. Possible environmental ar	11. Possible environmental and archeological issues have been assessed and addressed.															
12. Appropriate internal comm	nunications (e.g. area auth	nority, environmental business mar	nager), if applicable, have take	en place.												
13. For all new non-metallic u	nderground facilities being	g installed, line locating capabilities	s are being installed with it.													
14. All personnel involved with	h the ground disturbance l	have reviewed and discussed the	Ground Disturbance Practice.													
15. The valid certifications of	the qualified equipment op	perator have been reviewed and ar	e attached to this permit or in	the project safety re	ecord.											
16. The excavation design an	d construction checklist fo	or trenching has been completed for	or the initial ground disturbanc	е.												
17. A trench safety daily field	report shall be completed	each day prior to the start of work	for open trenches and excava	ations.												
18. All personnel involved in c	drilling have reviewed and	discussed the RM Environmental	Drilling Practice.													
19. Risk has been adequately assessed, and provisions have been or will be made to address unattended open excavations to verify the safety of the general public, livestock and wildlife until the site is remediated.																

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			UTILITY LOCA	TING SERVICE	ES													
Uti	lity Service Alert	t (USA) Notification (1-800-	-227-2600)				Yes I	No	NA									
US	A Ticket #:																	
Date	e Called:		Expires:			Caller:												
Date	e Extended:		Expires:			Caller:												
Date	e Extended:		Expires:			Caller:												
Pri	vate Utility Loca	ting Service / Geophysica	d .				Yes I	No	NA									
Nan	ne of Locating Service	e:		Date Comple	ted:													
Loc	ating Technician:			Contact Phor	ne #:													
Utili	ties Found and Marke	ed? Yes No NA		Map Attached	Map Attached? Yes No NA													
На	nd Clearance Pe	rformed (Air Knife or Han	d Auger)	Yes No NA														
Nan	ne of Locating Service	e:		Date Completed:														
Loc	ating Technician:			Contact Phone #:														
Met	hod Used:			Depth & Diameter of Hole:														
Utili	ties Encountered:	Yes No		Hole Backfille	ed: Ye	s No												
			UTILTIES	IDENITFIED														
Be	low-Ground Serv	vices		Below-grour			n work area?	res es	No									
Y/N	Utility Type	Utility Name	Utility Emergency Phone #	Depth BGS (ft)	Ground Mar		Date of Marking		lity notified of anned work									
	Electric	NV Energy	775-834-4100		Yes No	NA NA		Yes	No NA									
	Gas	Southwest Gas	775-882-0193		Yes No	NA NA		Yes	No NA									
	Phone	Verizon			Yes No	NA NA		Yes	No NA									
	Cable	Charter Cable			Yes No	NA NA		Yes	No NA									
	Pipeline	Paiute Pipeline (gas)	775-882-0148		Yes No	NA NA		Yes	No NA									
	Water				Yes No	NA NA		Yes	No NA									
	Sewer				Yes No	NA NA		Yes	No NA									
					Yes No	NA NA		Yes	No NA									
Ab	ove-Ground Ser	vices		Above-groui			n work area?	res	No									
Y/N	Utility Type	Utility Name	Utility Phone #	Height AGS (ft)	Ground Mar		Date of Marking		lity notified of anned work									
	Electric	NV Energy			Yes No	NA NA		Yes	No NA									
	Telephone	Verizon			Yes No	NA NA		Yes	No NA									
	Traffic Light					NA NA		Yes	No NA									
					Yes No	NA NA		Yes	No NA									
		Issuing Authorities who are also		g Signatures	Disturbanco	Practice mov	/ self-authorize											
cond equi that	ditions with respect to the pment involved or affect it is appropriate for the vice it is app	ted permit(s) and, based on my review e scope of work and affected equipmeted by this work has been prepared for	v of the documented ent, I believe that the or this scope of work, and	I have reviewed agree to perform and to notify the	and understan work within sissuing auth	and the perm these conditi ority upon co	it conditions specific to ions, to stop any work mpletion or interruptio izing Signature:	that I dee	m to be unsafe									

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UTILITY MAP

NOTE: A drawing or plot plan depicting the locations of marked and unknown underground utilities must either be drawn here or attached for all to review before, during and after the excavation. Mechanical ground disturbance may not proceed until facilities have been identified and plotted on a current drawing and communicated to all personnel involved in the ground disturbance task. Do not forget to consider horizontally installed facilities that may be poorly identified.



Utility Map Attached or Drawn Here?															Ye	s		No		N	ΙA													
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									Walk	over	with	site r	nana	ger, p	orope	erty o	wne	r, or	tena	nt re	pres	enta	ative.											
Site Walkover Applicable?														Ye	S		No																	
Site Mana	ager Name:																						Pl	non	e:									
City Engineer/Utility Representative:									Pl	non	e:																							
Owner or Tenant Name:									Pl	non	e:																							
Building utility service line connections identified? Yes No NA																																		
Comment																																		